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PTO/SB/21 (6-98)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/093,533	
	Filing Date	06/08/98	
	First Named Inventor	Michael Malcolm, et al.	
	Group Art Unit	2787	
	Examiner Name	Wang, M.	
Total Number of Pages in This Submission	65	Attorney Docket Number	CASH-001

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Terminal Disclaimer	PTO Form 1449 cited art, return postcard Fee Transmittal Form SB/17
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Small Entity Statement	
	<input type="checkbox"/> Request for Refund	
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Swernofsky Law Group
Signature	reg. no. 45,996
Date	August 22, 2000

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: August 23, 2000	
Typed or printed name	Roberta D. Roberts
Signature	Date August 23, 2000

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22883

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**FEE TRANSMITTAL  
for FY 2000**

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

**TOTAL AMOUNT OF PAYMENT (\$)** 240.00**Complete if Known**

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Filing Date	06/08/98
First Named Inventor	Malcolm, et al.
Examiner Name	Wang, M.
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METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																																																																																																													
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: 50-0365</p> <p>Deposit Account Name: Steven A. Swernofsky</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:  <input checked="" type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>	<p><b>3. 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108	690	208	345	Reissue filing fee																																																																																																																																																																																																																																																																										
114	150	214	75	Provisional filing fee																																																																																																																																																																																																																																																																										
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103	18	203	9	Claims in excess of 20																																																																																																																																																																																																																																																																										
102	78	202	39	Independent claims in excess of 3																																																																																																																																																																																																																																																																										
104	260	204	130	Multiple dependent claim, if not paid																																																																																																																																																																																																																																																																										
109	78	209	39	** Reissue independent claims over original patent																																																																																																																																																																																																																																																																										
110	18	210	9	** Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																																																																																										
<b>SUBTOTAL (2) (\$)</b>																																																																																																																																																																																																																																																																														

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	John C. Merchant	Registration No. (Attorney/Agent)	45,996
Signature		Telephone	650-947-0700
		Date	8-22-00

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This confirms receipt of the following papers at the USPTO:

Docket No: CASH-00  
Serial No: 09/093,533 Filing Date: 6/8/98  
Title of Inv: Network Object Cache Engine

First Named Inventor: malcolm, et al.

**PAPERS FILED:**

- ☒ Transmittal Form SB/21  
☒ Fee Transmittal Form SB/17 (2 copies) -- Check no. 3032 \$ 240.00  
☐ Notice to File Missing Parts of Application (copy)  
☐ Declaration or Oath ☐ Power of Atty ☐ Combined Decl/Power of Atty  
☐ Small Entity Statement  
☐ Assignment(s) ☐ Recordation Cov Sht ☐ 37 CFR 3.73(b) Statement  
☒ Information Disclosure Statement with ☒ Form 1449 ☒ References  
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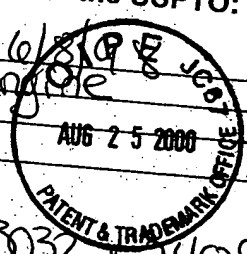
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